Table 3
Western Nebraska Veterans Home
Summary of MEMBER Satisfaction Survey Responses
2010

Number of Survey Responses = 46

Living Environment (Escility Wide)	YES			NO		SURE
Living Environment (Facility Wide)	#	%	#	%	#	%
Is your living environment comfortable?	41	91.1%	2	4.4%	2	4.4%
Do you have enough privacy?	43	97.7%	1	2.3%	0	0%
3. Are your personal belongings safe here?	38	92.7%	1	2.4%	2	4.9%
4. Is the home clean and tidy?	41	95.3%	1	2.3%	1	2.3%
Is your room arranged the way you would like it to be?	41	93.2%	2	4.5%	1	2.3%
Does your room include some of your personal possessions?	42	95.5%	2	4.5%	0	0%
7. If you were ill or injured, is it possible staff would not know it?	<u>7</u>	<u>15.9%</u>	<u>29</u>	<u>65.9%</u>	<u>8</u>	<u>18.2%</u>
8. <u>Does the level of noise in the facility</u> <u>bother you?</u>	<u>5</u>	<u>11.1%</u>	<u>39</u>	<u>86.7%</u>	<u>1</u>	<u>2.2%</u>
9. Is the facility in need of repair?	<u>8</u>	<u>19.5%</u>	<u>29</u>	<u>70.7%</u>	<u>4</u>	9.8%
Are the grounds clean, well kept and attractive?	44	97.8%	1	2.2%	0	0%
Are the sidewalks and parking lot surfaces smooth and safe to walk on?	36	81.8%	6	13.6%	2.0	4.5%
Does the facility accommodate a good nights sleep?	43	95.6%	1	2.2%	1	2.2%

Dining Experience	YES			NO		ISURE
Diffiling Experience	#	%	#	%	#	%
13. Is food available whenever you are hungry?	41	91.1%	2	4.4%	2	4.4%
14. Do you feel you have enough time to eat?	44	97.8%	1	2.2%	0	0%
15. If you need assistance to eat, is there enough staff available to assist you?	39	92.9%	0	0%	3	7.1%
16. Are you served the types of foods you like?	35	81.4%	6	14.0%	2	4.7%
Are there enough different kinds of food to choose from?	38	86.4%	6	13.6%	0	0%
Do you get enough food to eat during meals?	45	100%	0	0%	0	0%
Are the temperatures of the meals you receive okay?	41	93.2%	3	6.8%	0	0%
Is the food you receive prepared to your liking?	36	81.8%	6	13.6%	2	4.5%
21. Do you feel the environment in the dining room helps you to enjoy your meals?	38	84.4%	5	11.1%	2	4.4%

Activities	YES			NO		SURE
	#	%	#	%	#	%
Does the facility offer meaningful activities that you like to participate in?	35	79.5%	6	13.6%	3	6.8%
Is there enough opportunity to do self-directed activities such as reading, watching TV, or enjoying the outdoors etc?	43	95.6%	0	0%	2	4.4%
24. Are you informed of the activities available to you?	44	100%	0	0%	0	0%
25. Are you able to travel to off-campus outings when you want to?	38	86.4%	5	11.4%	1	2.3%
26. Does the facility offer sufficient entertainment for you to enjoy?	40	90.9%	1	2.3%	3	6.8%
Are there enough activities to choose from to meet your interests?	39	88.6%	4	9.1%	1	2.3%
Are activities offered during convenient time schedules?	43	97.7%	0	0%	1	2.3%
29. Do you get the help you need to attend activities?	44	97.8%	0	0%	1	2.2%
30. Do you have the opportunity to exercise and stay fit?	43	95.6%	2	4.4%	0	0%
31. Do you participate in facility-sponsored activities?	32	74.4%	8	18.6%	3	7.0%

	YES			NO		ISURE
Staff	#	%	#	%	#	%
32. Do the staff show they care about you?	43	100%	0	0%	0	0%
33. Do the staff respect your wishes?	42	97.7%	1	2.3%	0	0%
34. Do the staff understand what you are feeling or going through?	37	84.1%	3	6.8%	4	9.1%
35. Do the staff help you when you need it?	42	100%	0	0%	0	0%
36. When staff come into the room, do they tell you why they have come?	42	95.5%	2	4.5%	0	0%
Are the staff skilled and knowledgeable about how to take care of people?	41	95.3%	1	2.3%	1	2.3%
38. Do the staff answer your call light promptly?	34	89.5%	2	5.3%	2	5.3%
39. Do the staff follow-through with decisions that you make?	33	84.6%	2	5.1%	4	10.3%
40. Do staff knock before entering your room?	42	97.7%	1	2.3%	0	0%

Dispute	YES			NO	UNSURE	
Dignity	#	%	#	%	#	%
41. Do the staff call you by the name you prefer?	43	95.6%	2	4.4%	0	0%
Do the staff ensure that your personal hygiene is maintained?	44	100%	0	0%	0	0%
43. Is your personal physical privacy respected by staff?	44	97.8%	1	2.2%	0	0%
Do you have opportunities to help or support others?	37	86.0%	5	11.6%	1	2.3%
45. Do you feel a part of the daily activities of the home?	37	84.1%	5	11.4%	2	4.5%
46. Do you feel useful?	26	59.1%	11	25.0%	7	15.9%
47. Do you feel staff allow enough time for you?	44	97.8%	1	2.2%	0	0%
48. Are you ever placed in a situation that makes you feel uncomfortable?	<u>8</u>	<u>18.2%</u>	<u>32</u>	<u>72.7%</u>	<u>4</u>	<u>9.1%</u>
49. Do you feel staff are attentive to your needs?	44	100%	0	0%	0	0%
50. Are you treated with respect by staff?	45	100%	0	0%	0	0%

	YES			NO		SURE
Autonomy	#	%	#	%	#	%
51. Are you encouraged to participate in decisions about your care?	41	93.2%	1	2.3%	2	4.5%
52. Do you decide what you are going to do each day?	44	97.8%	0	0%	1	2.2%
53. Do you express feelings and opinions around here?	42	93.3%	1	2.2%	2	4.4%
54. Is equipment available that allows you to be more independent? (e.g., wheelchairs, walkers, bars)	42	100%	0	0%	0	0%
55. Do you feel you can come and go as you please?	41	91.1%	2	4.4%	2	4.4%
56. Do staff get back at you if you say or do something they don't like?	<u>8</u>	<u>19.0%</u>	<u>33</u>	<u>78.6%</u>	<u>1</u>	<u>2.4%</u>
57. Would you choose to have a different roommate?	<u>5</u>	<u>14.3%</u>	<u>29</u>	<u>82.9%</u>	<u>1</u>	2.9%
58. Can you choose when to have your bath or shower?	31	70.5%	10	22.7%	3	6.8%
59. Are you free to make choices such as wear the clothes you want to wear or go to bed and get up when you wish?	37	90.2%	3	7.3%	1	2.4%
60. Are your spiritual or religious needs provided for?	41	97.6%	1	2.4%	0	0%
61. Do you feel you are given enough opportunity to be connected to the community?	35	83.3%	5	11.9%	2	4.8%

		YES	NO		UNSURE	
Medical Care and Treatment	#	%	#	%	#	%
62. Are you helped if you are in pain or uncomfortable?	43	97.7%	1	2.3%	0	0%
63. Can you talk to your doctor when you need to?	38	88.4%	3	7.0%	2	4.7%
64. Do you receive the treatments and medications you need?	41	95.3%	2	4.7%	0	0%
65. If you are not feeling well, do you get medical help when needed?	44	100%	0	0%	0	0%
66. Do you receive therapy if you need it?	42	93.3%	3	6.7%	0	0%
67. Would you recommend this Home to others?	42	95.5%	2	4.5%	0	0%

Background information

	Less than 6 mos	6 mos to 1 year	1 - 3 years	More than 3 years	
68. How long have you lived at this Veterans Home?	1	4	16	23	
Percent?	2.3%	9.1%	36.4%	52.3%	

	<65 Years	65 - 74 Years	75 - 84 Years	85+ Years
69. What is your age?	2	4	16	18
Percent?	5.0%	10.0%	40.0%	45.0%

	Male	Female
70. What is your gender?	29	15
Percent?	65.9%	34.1%

	YES	NO	UNSURE	
71. If you could go back in time, would you make the same decision to move to this Veterans Home again?	39	2	3	
Percent?	88.6%	4.5%	6.8%	

	YES	NO	UNSURE	
72. Would you recommend this Veterans Home to your family and friends?	38	2	4	
Percent?	86.4%	4.5%	9.1%	